

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10729238

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS | 29 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 29 minus 20 = | * 9 |
| INDEPENDENT CLAIMS | 1 minus 3 = | * 2 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
|--------------|--------------------------|----------------------------|--------------------------|
| TYPE | <input type="checkbox"/> | OR | <input type="checkbox"/> |
| RATE | FEES | RATE | FEES |
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| XS 9= | | OR XS18= | 162 |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL | | OR TOTAL | 932 |

6-16-5 CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * 29 | Minus | ** 29 |
| Independent | * 1 | Minus | *** 3 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

| SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
|--------------------|--------------------------|----------------------------|--------------------------|
| TYPE | <input type="checkbox"/> | OR | <input type="checkbox"/> |
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| XS 9= | | OR XS18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * * | Minus | ** * |
| Independent | * * | Minus | *** * |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

| AMENDMENT B | | AMENDMENT C | |
|--------------------|--------------------------|-----------------------|--------------------------|
| TYPE | <input type="checkbox"/> | TYPE | <input type="checkbox"/> |
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| XS 9= | | OR XS18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * * | Minus | ** * |
| Independent | * * | Minus | *** * |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

| AMENDMENT C | | AMENDMENT D | |
|--------------------|--------------------------|-----------------------|--------------------------|
| TYPE | <input type="checkbox"/> | TYPE | <input type="checkbox"/> |
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| XS 9= | | OR XS18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.